# THE ANNUAL MUSEUM AT THE OXFORD MEETING.

A NEW and interesting feature of the late Oxford meeting of the Association was the Annual Museum. It originated in a suggestion made in this JOURNAL by Mr. Jonathan Hutchinson a few weeks ago; viz., that an exhibition of objects invented or collected during the year—a museum which should, in fact, show "the cream of the year's progress" in medicine and surgery—could hardly fail to be of great practical value to visitors attending the meeting. The local officers of the Association at Oxford immediately took up the suggestion; and their efforts, aided by the prompt and active cooperation of Mr. Hutchinson himself, resulted in a fairly successful realisation of his scheme. The exhibition was held in one of the lecture-rooms of the University Museum. Being the first of its kind, and brought together at short notice, it was not rigidly limited to objects collected or invented during the year. Exceptions were especially made where series of objects, some old, some new, but mutually illustrative, could be placed together. Every specimen was labelled with a clear, concise description. On the whole, the experiment was a success; though, of course, the *impromptu* character of the arrangements precluded that development and organisation which may be looked for at future meetings.

The objects contributed from various quarters on this occasion came under four heads—

1. Pathological Drawings, Preparations, Wax Models, etc.
2. New Instruments and Appliances in Medicine and Surgery.
3. Drugs and Articles of Medical Diet.
4. New English and Foreign Medical Works.

The Pathological Drawings were the most striking features of this exhibition. The great majority of them were contributed by Mr. Hutchinson himself, as illustrative of various interesting points in the pathology and diagnosis of syphilis and skin-diseases, and were not less admired for their artistic beauty than studied for their practical instructiveness. Syphilis was chiefly illustrated by Mr. Hutchinson in its rarer *external* manifestations, primary and secondary; while the drawings of Drs. Hermann Weber and Hughlings Jackson figured the same disease in *internal* organs. The department of skin-diseases contained two drawings and some wax models of that peculiar and rare disease, morphœa (Addison's keloid). The drawings in question were of cases in which the sclerïasis was exactly limited to one-half of the face, exemplifying, as in herpes zoster, the influence of the fifth nerve in the localisation of diseased processes. We noticed also some beautiful drawings of molluscum contagiosum—in particular, one of a case in which the contagion had taken place between the mother's breast and the infant's face. One of the tubercles on the mamma had ulcerated, and closely simulated a hard chancre. The rarer forms of herpes zoster, pediculi-eruptions, eczema, scabies, and erythema, were instructively illustrated by a series of portraits from various sources. Some of the drawings showed well the occasionally close anatomical resemblance between certain essentially different diseases, as, for instance, between erythema circinatum, a serpiginous form of ringworm, and tertiary syphilitic eruption. The application of Photography to pathological purposes received good illustration from several contributors, especially from Dr. Allbutt of Leeds in the department of skin-dseases; and from Mr. Hutchinson, in a series of stereoscopic portraits. Dr. Morell Mackenzie exhibited (for Dr. Turck) a beautiful series of coloured drawings of diseases of the larynx; Mr. Hinton, a series of illustrations of the pathology of the internal ear; Mr. Lund of Manchester, showed a probably unique specimen of congenital malposition of the external ear from a child aged about 2½ years. The auricle was placed in the middle of the left cheek, the natural position for it being quite smooth, and the skin perfect. The zygoma and the temporo-maxillary articulation of the same side were wanting, and there had likewise been a fissure at the left labial commissure, a hare-lip, and a cleft-palate. The misplaced ear, on removal, was found to contain traces of a cartilaginous meatus, tympanic bone, membrana tympani, and vesicles; as if, in the progress of growth, the primoidal cell representing these portions of the auditory apparatus, had slipped away from its attachment and fixed itself in this abnormal position. Dr. Peacock, Mr. Vincent Jackson, and others, exhibited various pathological specimens and drawings of high interest.

It was scarcely possible to look through such a collection, even cursorily, without either adding to one's knowledge of the diseases in question, or refreshing one's recollection of them.

There was no lack of novelty and interest in the exhibition of Instruments. We would notice very briefly a few of those exhibited by members of our own profession. Dr. J. W. Ogle showed a dynamometer and an æsthesiometer for testing the loss or gain of power and sensation in paralysis and other states; an instrument with screw-adjustment for keeping open a tracheotomy-wound; and a Middeldorff's harpoon for extracting bits of muscle in search for trichinæ—the characteristic of all these instruments being their small size and extreme simplicity. Dr. Warwick of Richmond exhibited a new form of endoscope; Dr. Heywood Smith, a portable induction apparatus (Trouvé's *trousse electrique*)—battery, coil, etc., all packing into the compass of an ordinary surgical pocket-case, and yet no toy; Dr. Sansom, a demonstrating microscope for class purposes; Dr. B. W. Richardson, an inhaler, an ether-spray apparatus, a series of anæsthetic compounds, together with several other objects of great interest; Dr. Althaus, a set of instruments for the electrolysis of tumours, and for applying galvanism to the œsophagus and prostate; Mr. Teevan, various urethral instruments; Mr. Coleman, an apparatus for economising nitrous oxide gas by re-inhalation.

"The trade" also contributed several novelties in the way of instruments and appliances. In noticing a very few of these in our limited space, we emphatically disclaim any intention to disparage the merits of the rest. Messrs. Ferguson showed, *inter alia*, a new mouth-opener, with some hare-lip and cleft-palate instruments, by Mr. T. Smith. Mr. Coxeter exhibited a Clover's apparatus for inhaling chloroform and nitrous oxide gas; Adams's spray-producer, a cheap, simple, and efficacious apparatus for inhalation or other purposes; a magneto-electric machine with direct negative and positive currents; a new compound hook and ring for an artificial arm socket; with several other instruments. Messrs. Krohne and Sesemann showed a Junker's apparatus for general and local anæsthesia, Beigel's pneumatic enema, various forms of spray-producers, galvano-caustic instruments for laryngeal and other tumours, etc. Messrs. Meyer and Meltzer showed an inhaler and a gas-cautery forceps by Clover, inhalers by Dr. John Murray and others, Hinton's demonstrating auroscope and endoscope combined, various tracheal and laryngeal instruments by Dr. Mackenzie and Mr. Evans, and uterine instruments by Dr. Marion Sims and others.

Among the articles of Medical Diet were several good farinaceous preparations from Chapman, and some unusually palatable diabetic biscuits from Hill and Bonthron. Mr. Morstatt exhibited a series of medicated soaps.

An extensive series of valuable new English and Foreign Medical Works were contributed by Messrs. Macmillan and Co., James Walton, Hardwicke, Lewis, Baillière, and the New Sydenham Society.

We append some remarks which have been forwarded to us by Mr. Jonathan Hutchinson, the originator of the Museum.

"Our Oxford experiment may, I think, be considered to have been a success, with certain drawbacks. As it had, however, been got up in a hurry, almost *impromptu*, one cannot be surprised at its shortcomings. Of its success, I think we may assert that it was sound; that it gave proof that the thing was wanted, and is likely to live. Of its imperfections, we may say that they were the result of haste and inexperience, and may easily be remedied in future. At Oxford, the scheme had the advantage of the cordial cooperation of those in authority on the spot. Dr. Acland, Dr. Gray, and Dr. Tuckwell did everything in their power to ensure its success. No one, however, could tell beforehand what the exact character or size of the exhibition would be. It turned out a much larger collection than we had expected; and the space accordingly proved very inadequate, and the objects were greatly crowded. Then, again, the room itself—a lecture-room in the gallery of the magnificent University Museum—was too far from the other work of the Association, and was difficult to find.

"With the experience of last week fresh in my mind, I may venture a few memoranda for our guidance at Leeds in August 1869.

1. We ought to have a large room or rooms, with abundance of tables and of wall-space. In reason, the larger the room, the better. The objects exhibited should be grouped; and, as the grouping must necessarily be done in a hurry, there is nothing like having plenty of room to do it in. In each department, there should be room to add at a moment's notice, as new objects are brought in; for, however much of early preparation is made, it is certain that many members will prefer to bring their contributions *propriâ manu*, and will bring them late. There ought to be room also, not only for the wide division of subjects and the adequate display of all, but also for chairs, and for pens and ink for note-takers. Room also is wanted in order that discussion or conversation may go on, or explanations be made, without inconvenience to others. It is exceedingly desirable that exhibitors should have every encouragement afforded to come frequently to their tables, and

explain to their friends or others the special points in their specimens, instruments, etc. Written labels will do much; but a few words of *viva voce* explanation are often invaluable.

"2. The room should be, if possible, in the same building as that in which the sections meet. It is essential that the room should be central. It should be so placed that a member waiting for a paper to come on could use it as a lounge, and thus profitably employ minutes which might otherwise be wearisome. A central situation would also allow members to go in and out at pleasure, and to examine the separate departments leisurely. As our exhibition is to present a sort of epitome of a whole year's work, it ought to be worthy not merely of *coup d'œil* inspection, but of detailed examination; and for this every facility should be given.

"3. There should be a few paid officials on the spot—one or two label-writers, a porter, etc. For these the Association ought to pay. It would be a great advantage, if, in addition to an adjacent room for unpacking, etc., there could be a small room for use as an office. The preparation of the room, etc., should begin a week beforehand.

"4. A good, short, but descriptive catalogue should be prepared and printed before the beginning of the meetings. It might even, perhaps, with advantage, be sent out to all members of the Association.

"5. It might be well, in some instances, to specify beforehand certain subjects which it is wished to specially illustrate, and invite the production of specimens. For instance, the precise character of the fracture known as Colles's is yet the subject of much dispute, which arises chiefly from the fact that but few of our museums possess recent specimens, and none of them any large number. Now, I have no doubt that the members of our Association, working together, and bringing up their specimens, one from one place, and another from another, might place on the table such an amount of pathological evidence as would settle for ever the questions most in debate, both as regards its nature and its best treatment. The results of hare-lip operations by the new and the old methods is a subject which, by the aid of photography, might be illustrated in a most instructive manner. It would be easy to mention twenty others; but I give these merely as examples. On the medical side, such subjects as the pathology of Addison's keloid (morphœa), of cicatricial keloid, of Basedow's disease, and of syphilitic affections of internal organs, might each receive a flood of light by the collection, through combined effort, of a considerable group of facts. In one or two of these subjects, important work was done at our last week's meeting.

"It is, perhaps, possible that it may be found a convenient plan to have one or two 'Museum Lectures' put into the programme of our meetings, to be given either by exhibitors of important series of subjects, or by some one appointed to survey and appreciate the whole, who should choose for remark and explanation what seemed most interesting.

"That there will be a large exhibition next year, I think there is no doubt. If the scheme be well organised, we shall probably have contributions from all quarters—from the continent and from America, as well as from all parts of our own islands. It might be well, perhaps, even thus early to appoint a few local secretaries in our several capitals, who should undertake the care of its interests, and receive contributions for it. By their aid, many interesting objects might be secured, which would otherwise not come to us; and much expense to individuals in carriage, etc., would be saved.

"I may record my own experience by simply stating that from the objects brought to our room I have gained information which I could have got nowhere else, and which would have fully repaid me for a far longer journey and much greater loss of time. Nor is this solid gain the less valued, because it will always be associated in memory with a variety of other intellectual benefits and a crowd of social pleasures enjoyed at our Oxford meeting."

HOSPITALS AND ASYLUMS IN FRANCE.—The number of hospitals in France is said to be 337, and of *hospices*, including asylums for the aged, infirm, incurable, orphans, and foundlings, 199, besides 734 establishments which are at once hospitals and asylums, making a total of 1,270, whereas, in 1805, the number was 1,920; this diminution being the result of improved organisation. The average income of these establishments amounted to about 20,000,000 *francs* at the end of the past century, but at present it is nearly triple that sum. The budget of Paris includes 44,000,000 *francs* for charitable purposes, of which 9,000,000 *francs* are devoted to the hospitals, and the remainder to the relief of the indigent; of this latter about one-third is collected by charitable societies, which number more than a hundred. In 1789, the number of persons in asylums was stated at 40,000, but they contain double that number at present, while the sick in the hospitals has risen since the same date from an average of 25,000 to 90,000.

# PROFESSOR HUXLEY'S HUNTERIAN LECTURES ON THE INVERTEBRATA.

*Delivered at the Royal College of Surgeons of England.*

## LECTURE XXII.

THERE is an important morphological difference as regards the disposition of the intestine in the different groups of Mollusca. In the Branchio-gasteropoda, the first important flexure of the intestine, after leaving the stomach, is towards the heart—it is a hæmal flexure. In the other three divisions, it is towards the pedal ganglia—it is a neural flexure. Except in the Lamellibranchiata, an Odontophore is always present at some period of life. This organ consists of a cartilaginous cushion, over which plays, by alternate muscular contractions, a fibrous band, called the lingual ribbon; the latter is beset with transverse rows of chitinous teeth, the arrangements of which afford good zoological characters. Sometimes (*e.g.*, in the Snail) there is a horny, vertical, so-called jaw. Sometimes there are two such structures placed laterally. In the Cephalopoda, the well known horny beak is like that of a Parrot, but reversed.

In many Branchio-gasteropods, there is a proboscis (*e.g.*, in the Whelk), which is usually hidden and enfolded, but can be everted by the compression of the fluid contents of the body. The true mouth is then seen at the end of this organ, which is retracted by complex muscles described by Cuvier. In some (*e.g.*, in Solen), a curious body, of unknown function, termed the "crystalline style", projects into the stomach, which is generally a simple cavity; but sometimes, especially in the hermaphrodite Branchiogasteropoda, is divided into as many as four compartments. There is in some a crop, as in the Whelk; and salivary glands are frequently present. In the Nudibranchiate Gasteropods, two canals proceed from the posterior part of the stomach, and each of them radiates in an arborescent manner. Their nature is probably hepatic. The liver in the Mollusca generally, is a considerable structure communicating with the intestine or stomach. In the Cephalopoda, it is exceptionally solid.

Often a gland which opens in the neighbourhood of the anus has a strongly coloured secretion. In the Dibranchiate Cephalopoda, there is an ink-bag, the contents of which, when expelled, so colour the surrounding water as to facilitate the escape of the animal. In Octopus, this bag is imbedded in the liver.

The organs of circulation are well developed in the Mollusca. The heart always consists, at the least, of two auricles and one ventricle; in the Lamellibranchs, it is traversed by the intestine. The arteries are well developed; but the venous system is lacunar, there being no true veins. This is well seen in such a transparent form as Atlanta. The heart of the Cephalopods is essentially the same as that of the other Mollusca; the auricles being represented by branchio-cardiac trunks.

The organs of respiration vary; generally lamellar in the bivalve molluscs, they are tree-like in the Cephalopoda, and more or less so in most Branchio-gasteropods. In the Cephalopoda, the gills themselves are contractile; and at the root of each is a contractile venous dilatation, or so-called branchial heart. In certain Branchio-gasteropoda, and in the Pteropoda, true gills are wanting, the lining of the mantle being the only respiratory surface; and this brings us towards the Pulmogasteropoda, in which the mantle cavity is modified for aërial respiration.

The renal organ is the structure which has been called the "organ of Bojanus." This, in Anodon, and probably in Lamellibranchs generally, is a folded tube, partly thin-walled, partly thick and glandular. It opens at one end into the pericardium, at the other on the surface of the body. Now the pericardium has certain of the venous channels opening into it, and thus a direct communication is established between the blood-system and the surrounding medium. This provision for a rapid increase or diminution in the quantity of fluid contained in the body is probably related in the protraction and retraction of the foot. An essentially similar structure exists in the other forms; but, in the Cephalopods, the sac which contains the renal organ has not yet been proved to communicate with the vascular system.

The nervous system is fundamentally the same in all Mollusca, and consists of three pairs of ganglia: 1, cerebral; 2, pedal; and 3, parieto-splanchnic. The cerebral ganglia are connected by a commissure, which lies above the gullet. Each cerebral ganglion is connected by a nervous cord both with one of the pedal and one of the parieto-splanchnic ganglia. In some, the parieto-splanchnic ganglia are closely approximated to the pedal ganglia, and altogether fused with them in the Cephalopoda, where the nervous system attains its maximum of concentration in the Mollusca. In this group, also, a cartilaginous structure (comparable to a very imperfect skull) supports the cerebral ganglia. This exists in a still more rudimentary condition in some Gasteropods.